

Principal Investigator:	IACUC#:	USDA ID (tag #/tattoo):	USF ID #:
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Recording Technician:	Arrival Date:	Source:
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Species:	Sex: M F	Age:	Body Weight:
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Description:

Identification (e.g., permanent markings, tattoos, or transponder):
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Prior Conditioning:

Heart Rate:	Respiratory Rate:	Body Temperature:	Capillary Refill Time:
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Please Circle Below to Indicate Subjective Impression as Either N=Normal, A=Abnormal, or blank indicates not done.
If Abnormal, please describe observations.

Eyes	N	A	Description:
Ears	N	A	Description:
Nose	N	A	Description:
Mouth	N	A	Description:
Skin. Coat	N	A	Description:
Nails	N	A	Description:

General Attitude and Condition:
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Assessment:

Treatment:

Plan:
